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**FACSIMILE TRANSMISSION COVER SHEET**

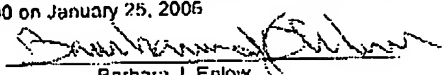
**FAX NO. : 571-273-8300**  
**PAGES : 15 (including this page)**  
**FROM : Rob L. Phillips (Registration No. 40,305)**  
**DATE : January 25, 2006**

Application No. :	10/765,413	Confirmation No. 2276
Applicant :	Steven J. Blad et al.	
Filed :	January 26, 2004	
Title :	Automatic Card Shuffler	
TC/A.U. :	3711	
Examiner :	Dolores R. Collins	
Docket No. :	88168.000020	
Customer No. :	29747	

Enclosed are:

1. (1 page) Request for Continuing Examination (RCE) Transmittal
2. (1 page) Copy of Request for Continuing Examination (RCE) Transmittal
3. (1 page) Amendment Cover
4. (1 page) Copy of Amendment Cover
5. (10 pages) Amendment

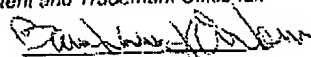
I hereby certify that this correspondence is being facsimile transmitted to the Patent and  
 Trademark Office fax number 571-273-8300 on January 25, 2006

  
 Barbara J. Enlow

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Barbara J. Enlow

Application No. : 10/765,413  
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JAN 25 2006

Mail Stop RCE  
Commissioner for Patents  
PO Box 1450  
Alexandria, Virginia 22313-1450

## AMENDMENT COVER SHEET

Commissioner:

Enclosed is an amendment in response to the Office action dated October 25, 2005.

## Calculation of Fees

	Highest No. claims paid	Claims in Excess	Claim Fees	Fee Due
Number of claims after amendment 20	25	0	* x25.00	
Independent claims after amendment 4	5	0	* x100.00	
Total Fees				0

The Director is hereby authorized to charge underpayment of fees, or credit any overpayments, that may be required by this paper to Deposit Account No. 502466. Please show our docket number with any Deposit Account transaction. A copy of this paper is enclosed.

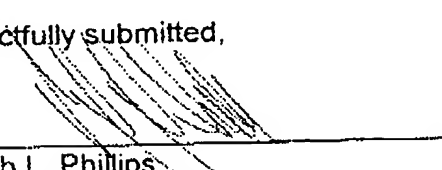
Also enclosed are: 1. Request for Continuing Examination (RCE) Transmittal

Respectfully submitted,

Greenberg Traurig  
3773 Howard Hughes Pkwy.  
Suite 500 North  
Las Vegas, Nevada 89109

Telephone : 702-792-3773  
Facsimile : 702 792-9002

By:

  
Rob L. Phillips  
Registration No. 40,305

Date: January 25, 2006

The Commissioner is hereby authorized to charge any deficiency or credit any overpayment of fees which may be required by this paper to Deposit Account No. 502466 including any fee for extension of time, or the fee for additional claims which may be required. Please show our docket number with any Deposit Account transaction. A copy of this letter is enclosed.

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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*Barbara J. Enlow*  
Barbara J. Enlow

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Commissioner:

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## Calculation of Fees

	Highest No. claims paid	Claims in Excess	Claim Fees	Fee Due
Number of claims after amendment	20	0	* x25.00	
Independent claims after amendment	4	0	* x100.00	
			Total Fees	0

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